ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden

hours per form

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY			
Prefix	Serial		
DATE/RE	ÇEIVED		
N. S. A.	// CO//		

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Series A Preferred Stock Financing Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE

185

RECEIVED

Type of Filing: New Filing Amendment

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Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

Dragnet Solutions, Inc.

Address of Executive Offices

(Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (650) 931-2352

1350 Bayshore Highway, Suite 210, Burlingame, CA 94010

Address of Principal Business Operations

Actual or Estimated Date of Incorporation or Organization:

(Number and Street, City, State, Zip Code)

Telephone Number (Including Area Code)

(if different from Executive Offices)

Brief Description of Business

Software development and licensing

Type of Business Organization

🖾 corporation 🗆 limited partnership, already formed 🗆 other (please specify): 🗆 business trust 🗀 limited partnership, to be formed Month

Year

1 0 3

☑ Actual ☐ Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

CN for Canada; FN for other foreign jurisdiction)

CA

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) Coté, Gregory M. Business or Residence Address (Number and Street, City, State, Zip Code) 1350 Bayshore Highway, Suite 210, Burlingame, CA 94010 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Pliner, Michael S. Business or Residence Address (Number and Street, City, State, Zip Code) 1350 Bayshore Highway, Suite 210, Burlingame, CA 94010 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ■ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Root, Gary M. Business or Residence Address (Number and Street, City, State, Zip Code) 1350 Bayshore Highway, Suite 210, Burlingame, CA 94010 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Harrus, Alain Business or Residence Address (Number and Street, City, State, Zip Code) 1550 El Camino Real, Suite 275, Menlo Park, CA 94025-4111 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer X Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Lenet, Scott Business or Residence Address (Number and Street, City, State, Zip Code) 2882 Sand Hill Road, Suite 150, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Reinhard Nevada LLC Business or Residence Address (Number and Street, City, State, Zip Code) PO Box 5368, San Jose, CA 95150 ☐ General and/or Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Wiese, Russell O. Business or Residence Address (Number and Street, City, State, Zip Code) 39 East 79th Street, Apartment 12A, New York, NY 10021 Check Box(es) that Apply: □ Promoter ■ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Compass Venture Partners II, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 1550 El Camino Real, Suite 275, Menlo Park, CA 94025-4111 Check Box(es) that Apply: Promoter ■ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) DFJ Frontier Fund, L.P. Business or Residence Address (Number and Street, City, State, Zip Code)

2882 Sand Hill Road, Suite 150, Menlo Park, CA 94025

B. INFORMATION ABOUT OFFERING	* .		
	Yes	No	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		X	
Answer also in Appendix, Column 2, if filing under ULOE.			
2. What is the minimum investment that will be accepted from any individual?			
3. Does the offering permit joint ownership of a single unit?			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.			
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	☐ All [ID] [MO] [PA] [PR]	States	
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	☐ All [ID] [MO] [PA] [PR]	l States	
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)	de la companya de la		
Name of Associated Broker or Dealer			
Traine of Associated Broker of Beater			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	□ Al [ID] [MO] [PA] [PR]	l States	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the tot already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchang check this box □ and indicate in the columns below the amounts of the securities offered for	e offering,	
and already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$ <u>3,138,101</u>	\$3,138,101
☐ Common ☑ Preferred	-	
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify)	\$	\$
Total	\$ <u>3,138,101</u>	\$ <u>3,138,101</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
 Enter the number of accredited and non-accredited investors who have purchased securities offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, the number of persons who have purchased securities and the aggregate dollar amount purchases on the total lines. Enter "0" if answer is "none" or "zero." 	, indicate	
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors		\$3,138,101
Non-accredited Investors		
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for al sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) more to the first sale of securities in this offering. Classify securities by type listed in Part C - Que	onths prior	
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505	-	= -
Regulation A		
Rule 504		
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate.	tion of the the issuer.	
Transfer Agent's Fees		ı \$
Printing and Engraving Costs		I \$
Legal Fees	Σ	3 \$ 30,000.00
Accounting Fees] \$
Engineering Fees] \$
Sales and Commissions (specify finders' fees separately)] \$
Other Expenses (identify) State exemption filings		1 \$
Total	_	30,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS				
b. Enter the difference between the aggregate offering price in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."				\$3,108,101
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish a estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4. above.	n st			
		Payments to Officers, Directors, & Affiliates		Payments to Others
Salaries and fees		\$		\$
Purchase of real estate		\$		\$
Purchase, rental or leasing and installation of machinery and equipment		\$		\$
Construction or leasing of plant buildings and facilities		\$		\$
Acquisition of other businesses (including the value of securities involved in this offering				
that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$		\$
Repayment of indebtedness		\$		\$
Working capital		\$	X	\$3,108,101
Other (specify):		\$		\$
		\$		\$
Column Totals		\$	X	\$ <u>3,108,101</u>

S \$3,108,101

Total Payments Listed (column totals added).....

D.	FED	FRA	LSI	GNATI	IRE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Dragnet Solutions, Inc.	Ang M Cot	8-25-05
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Gregory M. Coté	Chief Executive Officer	